

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 293

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Lois Murphy For Congress

A. Full Name (Last, First, Middle Initial) Mark Palermo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 246 Garfield Place		Transaction ID: C115759
City Brooklyn	State NY	Zip Code 11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer ASCAP	Occupation Business Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Mr. Bruce Berger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address P.O. Box 482		Transaction ID: C130449
City Aspen	State CO	Zip Code 81612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation REQUESTED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Kay Deaux		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 20 E 9th St Apt 20 E		Transaction ID: C122711
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CUNY	Occupation professor	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2550.00

TOTAL This Period (last page this line number only)